

DATE: December 1, 2004

TO: County Emergency Management Directors

FROM: Jerry Haberl, State Training Supervisor

SUBJECT: Course Recruitment: RESOURCE MANAGEMENT – (G276)

The Division of Emergency Management will sponsor the Federal Emergency Management Agency course entitled **Resource Management – (G276)** on **FEBRUARY 28 – MARCH 1, 2005** at **Volk Field, Camp Douglas, Wisconsin**. The course will begin at 8:00 a.m. on Monday, February 28th, and conclude at approximately 4:00 p.m. on Tuesday, March 1, 2005. Dress is casual.

The course is designed to train emergency management professionals to coordinate the use of resources during a critical incident. Recruitment should include emergency managers, elected officials, department heads, and volunteer group representatives.

If people travel more than 50-miles one way, and do not desire to commute, **we will make reservations** for them at Volk Field. Wisconsin Emergency Management will pay for lodging costs (*for those traveling 50-miles or more one-way*) and meals for all participants; however, expenses for travel and any other incidental costs associated with your stay are a local responsibility. Additional administrative information will be provided in letters of confirmation to be sent when the course roster is finalized.

Please have prospective participants complete the attached registration form, and return the form to your Regional Office no later than **JANUARY 28, 2005**.

Thank you for helping us bring emergency management training to your community. If you have any questions, or need further information, please call your Regional Director, or Lisa Olson-McDonald at (608) 427-1794.

Encl: Registration Form

cc: WEM Management Staff
Regional Offices
Peter Jensen
Lisa Olson-McDonald
Hazardous Materials Response Teams
Financial Specialist

REGISTRATION INFORMATION
RESOURCE MANAGEMENT – (G276)
FEBRUARY 28-29, 2005
VOLK FIELD, WI

Please complete the information below and send it to your County Director by January 27, 2005. County Directors must submit this registration to their Region Office no later than January 28, 2005. Due to the demand for emergency management training, we recommend that you submit your applications as soon as possible. (Reproduce this sheet locally for additional people.) (Print clearly)

NAME _____ SIGNATURE _____

TITLE _____ AGENCY _____

SOCIAL SECURITY NUMBER _____
(MUST BE PROVIDED TO REGISTER)

HOME ADDRESS _____

CITY: _____ ZIP _____ COUNTY _____

WORK PHONE # _____ FAX #: _____ EMAIL _____

State Privacy Provision Authorization: Wisc Stats 166.03 and E.O. 9397.
Disclosure: Disclosure of personal information is voluntary; however, nondisclosure may result in delay in processing your application. Secondary Purpose: In accordance with Wisconsin Privacy Provision 15.04(m) Wisc Stats, the personal information you provide may be used for purposes other than for which it was collected.

LODGING INFORMATION

_____ I live within 50 Miles, and do not need a room.
_____ I live over 50 miles away; please reserve a room on the following nights:

(PLEASE CIRCLE THE NIGHT(S) THAT YOU NEED LODGING

SUNDAY, FEBRUARY 27, 2005

MONDAY, FEBRUARY 28, 2005

Do you require any special accommodations for a physical disability?

SIGNATURE OF COUNTY EM DIRECTOR/DATE _____

SIGNATURE OF REGIONAL
DIRECTOR/DATE _____